24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
DCCC	
	C C00000935
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Ralston Lapp Media, LLC Date of Dissemination: 10/21/16	M M / D D / Y Y Y Y Y
Mailing Address 1054 31st Street, NW	10 21 2016
Suite 430	Amount
City State Zip Code	12463.75
Washington DC 20007	Transaction ID : SE-953191 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 21 2016
Name of Federal Candidate Support Office	Sought: K House District: 06
Coffman, Michael, , ,	President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	other (specify) ►
Full Name of Payee McKenna Pihlaja, Inc.	Date of Public Distribution/Dissemination
Date of Dissemination: 10/21/16	10 21 2016
Mailing Address 1777 Church Street NW	Amount
City State Zip Code	2680.00
Washington DC 20036	Transaction ID : SE-953193 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 21 7 2016
Name of Federal Candidate Support Office	e Sought: K House District: 02
Poliquin, Bruce, , ,	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	15143.75
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ward, Kelly, C., , [Electronically Filed] Date 1	0 22 Y 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ADENT EXPEND	HONES		PAGE 2 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FFC II	DENTIFICATION NUMBER ▼
DCCC			C	C00000935
Check if 24-hour report 48-hour report	ort New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Publi	ic Distribution/Dissemination
Dixon Davis Media Group, LLO Date of Dissemir			10 N	22 2016
Mailing Address 1028 33rd Street, NW Suite 300			Amount	
City	State	Zip Code		4351.00
Washington	DC	20007		ID: SE-953195 ursement or Obligation
Purpose of Expenditure Media Production		Category/ Type 004	10	21 2016
Name of Federal Candidate		Support	Office Sought:	✗ House District:01
Bergman, John, , ,		X Oppose	President	Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		653347.80	Disbursement For: 2016 Other (sp	Primary ✗ General pecify) ▶
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
Three Point Media, LLC Date of Dissemin	nation: 10/21/16		10	21 2016
Mailing Address 1000 Potomac Street, NV	V		Amount	
Suite 500				
City	State	Zip Code		14645.95
Washington	DC	20007		D: SE-953188 oursement or Obligation
Purpose of Expenditure Media Production		Category/ Type 004	10	21 / 2016
Name of Federal Candidate		x Support	Office Sought:	✗ House District:08
Nolan, Richard, Michael, ,		Oppose	President	Senate State: MN
Calendar Year-To-Date Per Election for Office Sought		2829386.56	Disbursement For: 2016 Other (s	Primary X General pecify) ▶
(a) SUBTOTAL of Itemized Independent Exp	enditures		•	18996.95
(b) SUBTOTAL of Unitemized Independent E	Expenditures		•	
(c) TOTAL Independent Expenditures			•	49. 1 49. 1
Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Ward, Kelly, C., ,	[Electron	nically Filed] Date	9 10 / 22	2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Scriedule Ly	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
DCCC	C C00000935
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	ate of Public Distribution/Dissemination
SKDKnickerbocker LLC Date of Dissemination: 10/22/16	10 22 2016
Mailing Address 1150 18th Street, NW	
Suite 800	nount
City State Zip Code	4500.00
	ansaction ID : SE-953199 ate of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 D D D D D D D D D D D D D D D D D D D
Name of Federal Candidate Support Office So	ught: 🗶 House District:19
Face John I	sident Senate State: NY
Calendar Year-To-Date Disburser	
Per Election for Office Sought 1052607.99 2016	Other (specify)
Full Name of Payee Dixon Davis Media Group, LLC Date of Dissemination: 10/22/16	ate of Public Distribution/Dissemination
Mailing Address 1028 33rd Street, NW	10 22 2016
1020 0014 011001, 1444	mount
City State Zip Code	4876.00
	nsaction ID : SE-953194 ate of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 21 2016
Name of Federal Candidate Support Office So	ought: 🗶 House District:02
Ashford Bred	esident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought Disburser 2016	
(a) CURTOTAL of beginning before a first 5.	
(a) SUBTOTAL of Itemized Independent Expenditures	9376.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Ward, Kelly, C., , [Electronically Filed] Date 10	22 2016
Signature	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

ochedule L)				FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER	,
DCCC				C C00000935	
Check if 24-hour report	48-hour report New rep	ort Amends repor		= M / D = D / Y = Y = Y]
Full Name of Payee			Date o	of Public Distribution/Dissemination	
Precision Network,	LLC Date of Dissemination: 10/21/16			10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1140 Conne					_
Suite 800			Amour	nt 	
City	State	Zip Code		2000.00	
Washington	DC	20036		action ID : SE-953192 of Disbursement or Obligation	
Purpose of Expenditure Media Production		Category/ Type 004		10 21 2016	
Name of Federal Candidate		x Support	Office Sought	t: Nouse District: 23	
Gallego, Pete, , ,		Oppose	Preside	ent Senate State: TX	_
Calendar Year-To-Date Per Election for Office S	Sought	2284360.18	Disbursement 2016		al
Full Name of Payee				ther (specify)	_
Vision Strategy and	Insights Date of Dissemination: 10/21/16			of Public Distribution/Dissemination 10 21 2016	
Mailing Address 5420 Syli	mar Avenue, #115		Amour		_
City	State	Zip Code		1950.00	
Sherman Oaks	CA	91401		oction ID : SE-953190 of Disbursement or Obligation	
Purpose of Expenditure Media Production		Category/ Type 004	М	10 21 2016	
Name of Federal Candidate		✗ Support	Office Sough	it: 🗶 House District: 23	
Gallego, Pete, , ,		Oppose	Preside	ent Senate State: TX	_
Calendar Year-To-Date Per Election for Office S	Sought	2284360.18	Disbursement 2016	rt For: Primary General Sther (specify) ■	al
(a) SURTOTAL of Homized In	ndependent Expenditures		-		
(a) SOBIOTAL OF REHIEZEU II	порониетт Ехренициев		, —	3950.00	4
(b) SUBTOTAL of Unitemized	Independent Expenditures		•		_
(c) TOTAL Independent Expe	enditures		.		
	rtify that the independent expenditures gestion of, any candidate or authorized party committee or its agent.				
Ward, Kelly, C., ,	[Electron	nically Filed] Date	10	22 2016	
Signature					

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ENDENT EXICID	ITOTILO	-	PAGE 5 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
DCCC				C00000935
Check if 24-hour report 48-hour	report New rep	ort Amends repo	ort filed on	D = D / Y = Y = Y = Y
Full Name of Payee Vision Strategy and Insights	mination: 10/21/16		Date of Public	Distribution/Dissemination
Mailing Address 5420 Sylmar Avenue, #			Amount	21 2016
City Sherman Oaks	State CA	Zip Code 91401	Transaction II	14750.00
Purpose of Expenditure Media Production		Category/		rsement or Obligation
Name of Federal Candidate		Type 004 Support	Office Sought:	
Gallego, Pete, , ,		Oppose	President President	Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	,	2284360.18	Disbursement For: 2016 Other (spe	Primary x General ecify) ▶
Full Name of Payee Great American Media Date of Disse	emination: 10/22/16		Date of Public	Distribution/Dissemination
Mailing Address 3050 K Street, NW			Amount	22 2010
Suite 100	State	Zip Code		22078.20
Washington	DC	20007	Transaction ID Date of Disbu	: SE-953198 rsement or Obligation
Purpose of Expenditure Media Buy		Category/ Type 004	10	21 / 2016
Name of Federal Candidate		Support	Office Sought:	House District: 10
Comstock, Barbara, , ,		X Oppose	President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		486055.45	Disbursement For: 2016 Other (sp	Primary ✗ General ecify) ▶
(a) SUBTOTAL of Itemized Independent	Expenditures		. •	36828.20
(b) SUBTOTAL of Unitemized Independen	nt Expenditures		. •	
(c) TOTAL Independent Expenditures			•	7 7
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorized			
Ward, Kelly, C., , Signature	[Electron	ically Filed] Date	10 / 22	2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
DCCC		C C00000935
Check if 24-hour report 48-hour report New rep	port Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Great American Media Date of Dissemination: 10/22/16		10 22 2016
Mailing Address 3050 K Street, NW		
Suite 100		Amount
City State	Zip Code	4787.64
Washington DC	20007	Transaction ID : SE-953197 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy	Category/ Type 004	10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	Sought: House District: 10
Comstock, Barbara, , ,		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	Disbu 2016	rsement For: Primary General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Great American Media Date of Dissemination: 10/22/16		10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3050 K Street, NW		10 22 2010
Suite 100		Amount
City State	Zip Code	22078.20
Washington DC	20007	Transaction ID : SE-953196 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy	Category/ Type 004	10 21 2016
Name of Federal Candidate	Support Office	Sought: House District: 00
Trump, Donald, J., ,	X Oppose X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	3126524.61 Disbu 2016	rsement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	>	26865.84
(b) SUBTOTAL of Unitemized Independent Expenditures	····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	nically Filed] Date 10	0 22 2016
Signature		

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 7 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
DCCC		C C00000935
		O
Check if 24-hour report 48-hour report Ne	w report Amends report	filed on M M / D D / Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Adelstein & Associates LLC Date of Dissemination: 10/22/16		10 22 2016
Mailing Address 222 West Ontario Street, Suite 600		Amount
City State	Zip Code	94960.00
Chicago	·	
Purpose of Expenditure Media Buy	Category/ Type 004	Date of Disbursement or Obligation 10 13 2016
Name of Federal Candidate	Support C	Office Sought: House District: 00
Trump, Donald, J., ,	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		oisbursement For: Primary General
rei Liection for Office Sought	7	Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Malling Address		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State	Zip Code	
		Pate of Birthur areas are Obligation
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
	Type	
Name of Federal Candidate	Support C	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date		Disbursement For: Primary General
Per Election for Office Sought	7	Other (specify) >
, , <u>, , , , , , , , , , , , , , , , , </u>		
(a) SUBTOTAL of Itemized Independent Expenditures	·············	94960.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		200420 74
• • • • • • • • • • • • • • • • • • • •		206120.74
Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or auth party committee) any political party committee or its agent.		
Ward, Kelly, C., ,	ectronically Filed] Date	10 22 2016
Signature		